



DEPARTMENT OF HEALTH & HUMAN SERVICES

Health Care Financing Administration

Center for Health Plan and Providers  
7500 Security Boulevard, C4-23-07, Central Building  
Baltimore, Maryland 21244-1850  
410-786-6505; FAX 410-786-8933

## IMPORTANT NOTICE ABOUT YOUR MEDICARE BENEFITS

### KEEP THIS NOTICE

### AS PROOF OF MEMBERSHIP IN TUFTS HEALTH PLAN OF NEW ENGLAND'S SECURE HORIZONS TO TUFTS HEALTH PLAN FOR SENIORS

Call the Health Insurance Counseling, Education and Assistance Service (HICEAS) at  
1-800-852-3388 if you have any questions about this letter.

Dear [insert Aged & Disabled NH beneficiary's name] –

The Health Care Financing Administration (HCFA) has made a determination that it will end its Medicare + Choice contract with Tufts Health Plan of New England, Inc. (TNE) on February 1, 2000. This action is necessary because the New Hampshire (NH) Department of Insurance obtained a court order appointing its commissioner, Paula T. Rogers, as Liquidator of TNE. In filings made with Merrimack County Superior Court, TNE consented to the State of New Hampshire's finding that it was insolvent and to the appointment of a Liquidator.

After January 31, 2000, TNE will no longer offer Secure Horizons coverage to Medicare members in the state of New Hampshire. This letter will provide you with information about your options for 2000, including information about other managed care plans available to you, Medigap options if you choose the Original Medicare Plan, and information about other resources available to help you.

Changing the way you receive your health care is an important decision. You may wish to ask people you trust for help -- such as your family and friends. ***If you or your spouse have health care coverage through a former employer or union, please call your benefits representative before you make a new health plan choice.*** If you have Medicaid coverage, please call your local state medical assistance office or call the NH DHS customer service number at 1-888-DHS-3322 (1-800-347-3322) or the State Medical Assistance Office at 1-603-271-4344 before you make a new health plan choice. **And remember, no matter what decisions you make, you are still in the Medicare program.**

- Under the direction of the Liquidator, TNE will continue to provide health care coverage to Medicare beneficiaries who currently are enrolled in Secure Horizons through January 31, 2000.

- For Medicare beneficiaries who are hospitalized, TNE will continue to provide coverage until the beneficiary is discharged from the hospital.
- Remember, until your disenrollment from Secure Horizons is effective, you must continue to use contracted doctors and other health plan providers, except for emergencies and urgently needed care.

**The following health care options are available to you when making your health care decisions:**

1. You may be able to join another Medicare managed care plan;

**OR**

2. You can choose to receive your health care benefits from the Original Medicare Plan also known as traditional Medicare or fee-for-service Medicare. If you return to Original Medicare, you can also choose to purchase a Medigap policy to provide coverage for the items and services not covered by Original Medicare.

If your primary care physician also participates in Original Medicare, you may continue to receive services from him or her under the second option.

These options are discussed in more detail in this letter.

### **HEALTH CARE OPTIONS AVAILABLE TO YOU**

***If you or your spouse have health care coverage through a former employer or union, please call your benefits representative before you make a new health plan choice.***

#### **1. Joining Another Medicare Managed Care Plan In Your Area**

One option available to you is to enroll in another Medicare managed care plan in your area. You may enroll in another managed care plan if you are entitled to Medicare Parts A<sup>1</sup> and B<sup>2</sup> and you do not have permanent kidney failure (ESRD). You must also live in the Medicare health plan's service area.

The following Medicare managed care plan is the only plan that will be available in parts of New Hampshire. This managed care plan is required to accept your enrollment during a Special Election Period, which begins January 1, 2000 and ends March 31, 2000. You will need to live in the plan's service area to be eligible to enroll. Please note that if you do not choose to enroll in another Medicare managed care plan before January 31, 2000, you will be covered by Original Medicare beginning February 1, 2000 and may be responsible for deductibles and copayments. However, the Special Election Period will still be in effect should you wish to subsequently enroll in a Medicare managed care plan during the months of February or March.

Footnotes:

<sup>1</sup> - Medicare Part A (hospital insurance) pays for inpatient hospital stays, care in a skilled nursing facility, home health care, and hospice care.

<sup>2</sup> - Medicare Part B (medical insurance) pays for doctor's visits, outpatient care, and or medical services that are not covered by Medicare Part A.

**Plan Name :** Harvard Pilgrim Health Care of New England  
**Medicare Name :** First Seniority  
**Address:** 3 Allied Drive  
Dedham, MA 02026  
**Telephone:** 1-800-799-2013 (TTY 1-888-259-8276)  
**Service Area:** Parts of Rockingham and Hillsborough Counties (Please call to see if you live within the service area.)

## **2. The Original Medicare Plan**

The other option is to return to the Original Medicare Plan. You will automatically be disenrolled from Secure Horizons and begin receiving benefits from the Original Medicare Plan starting February 1, 2000.

### **MEDIGAP OPTIONS IF YOU CHOOSE THE ORIGINAL MEDICARE PLAN**

Under the Original Medicare Plan, you may decide that you need more coverage than the Original Medicare Plan provides. Many private insurance companies sell Medicare Supplemental (Medigap) Insurance Policies for the specific purpose of filling the "gaps" in Original Medicare Plan coverage. Medigap policies only work with the Original Medicare Plan. *Similar coverage may also be available to retirees through an employer or union health plan.*

As mentioned above, "gaps" would include costs that are not covered under the Original Medicare Plan like deductibles and coinsurance. Medigap policies may pay for some or all of the Medicare coinsurance amounts; some or all deductibles; and certain services not covered by the Original Medicare Plan at all. Some of the 10 standardized Medigap plans pay for services not covered by Medicare such as some outpatient prescription drugs, preventive screening, some care in your home, and emergency medical care while traveling outside the United States.

You may want to consider buying a Medigap policy to help pay for those costs. However, you are not required to purchase a Medigap policy in order to have coverage under the Original Medicare Plan.

Keep a copy of THIS letter as proof to the Medigap insurer that you lost your coverage from your health plan.

**\* \* \* CAUTION \* \* \***

### **READ THE FOLLOWING IF YOU ARE CONSIDERING PURCHASING A MEDIGAP POLICY:**

- If you do not enroll in another Medicare managed care plan, you will be enrolled in the Original Medicare Plan on February 1, 2000. You will be guaranteed the right to purchase some types of Medigap coverage regardless of your health status.

You may apply for one of these policies before January 31, 2000. **We recommend that you apply in January** and arrange for the policy to take effect February 1, 2000.

To receive this guaranteed right to purchase, you must apply for a Medigap policy by April 3, 2000 - by law you

have 63 days from February 1, 2000.

**Read Attachment 2 on Medigap -- which provides more detailed information about your rights, protections and options.**

**FOR ADDITIONAL INFORMATION & ASSISTANCE**

Attachment 1 provides a list of additional resources that are available to help you understand the information in this letter and make any important health care decisions.

We regret the need for this action and apologize for any inconvenience our decision may have caused you. If you need more information, please feel free to contact Secure Horizons Customer Relations Department at 1-800-701-9000. If you are hearing impaired, call Secure Horizons Telephonic Device for the Deaf (TDD) at 1-800-208-9562. Customer Relations Representatives at this number are available, Monday through Friday, 8:30 a.m. to 5:00 p.m.

Sincerely,



Gary A. Bailey  
Director  
Health Plan Purchasing and Administration Group

Attachments:

- Information & Assistance
- Important Medigap Information

## INFORMATION & ASSISTANCE

- **MEDICARE+CHOICES HELPLINE 1-800-MEDICARE (1-800-633-4227) and TTY (1-877-486-2048)**

This helpline is run by the Health Care Financing Administration (HCFA), the Federal Agency that administers the Medicare Program. Customer Service Representatives are available, Monday through Friday (8:00 a.m. to 4:30 p.m. local time), to answer questions about the Original Medicare Plan and provide up-to-date information on managed care plans in your area.

Last year, you received a copy of the *Medicare & You* handbook. The handbook provides information on your health care options. The handbook is available in English, Spanish, braille, or on audiotape. Other helpful publications available from the Medicare Choices Helpline include: *Understanding Your Medicare Choices*, *the 1999 Guide to Health Insurance for People with Medicare*, and *Medicare Supplemental Insurance (Medigap) Policies and Protections*.

- **HEALTH INSURANCE COUNSELING, EDUCATION AND ASSISTANCE SERVICE (HICEAS) at 1-800-852-3388**

HICEAS volunteers are available to discuss your situation and provide information on all options that are available to you.

- **New Hampshire Department of Elderly Affairs at 1-603-271-3944**

Call if you have questions about the Medigap policies available in your area.

- **ASSISTANCE FOR LOW-INCOME MEDICARE INDIVIDUALS & COUPLES**

If you have low income (less than \$1,222 per month for an individual or \$1,633 per month for a couple), you may qualify for some assistance with your Medicare premiums, deductibles, and coinsurance costs. Call 1-800-MEDICARE (1-800-633-4227) and ask about Medicare savings for qualified beneficiaries.

- **INTERNET SITE: WWW.MEDICARE.GOV**

This website provides extensive information on the Medicare program including the text of the Medicare & You handbook and the 1999 Guide to Health Insurance for People with Medicare. You can check the Medicare Compare database to see if any new managed care plans become available in your area in the future. The website also lists referrals to local information sources and links to other health sites.

## IMPORTANT MEDIGAP INFORMATION

**Please read the following regarding the Medigap rights, protections and options that are available to you.**

1. As long as you apply for a Medigap policy by April 3, 2000 (not later than 63 days after your coverage with your current managed care plan terminates on January 31, 2000), you are guaranteed the right to buy any Medigap plan designated A, B, C, or F that is available in your State.

Companies selling these policies cannot:

- deny you the policy,
- place conditions on the policy (such as a waiting period or an exclusion of benefits based on a pre-existing condition), or
- discriminate in the price of the policy because of your health status, claims experience, receipt of health care or your personal medical condition.

**\* \* \* CAUTION \* \* \***

You may apply for one of these policies before January 31, 2000 (**we recommend that you apply in January**) and arrange for it to take effect February 1, 2000.

**Keep a copy of this letter as proof to the Medigap insurer that you lost coverage with your health care plan.**

2. If you dropped a Medigap policy in order to join your current healthcare plan and you have never been enrolled in another managed care plan since starting Medicare, **you are guaranteed the right** to return to the Medigap policy you dropped if:
  - The Medigap policy you dropped is still being sold by the same insurance company;
  - You leave your current managed care plan within 12 months of initially enrolling in it; and,
  - You reapply for the policy you dropped no later than 63 days after the effective date of your disenrollment from this managed care plan.

If your previous Medigap policy is no longer available, you are still guaranteed the right to buy any Medigap policy designated A, B, C or F from any Medigap carrier that offers these policies in your state (as described above).

3. If, within the last year, you enrolled directly into your current managed care plan when you first became entitled to Medicare at age 65, you are guaranteed the right to select any Medigap plan that is offered by any insurer in your state (including plans H, I, and J which provide some prescription drug benefits) if:
- You voluntarily disenroll from your managed care plan within 12 months of initially enrolling in it; and
  - You apply for the policy of your choice no later than 63 days after the effective date of your leaving this managed care plan.

If you have any questions, concerns or need additional information on your options, contact the Health Insurance Counseling, Education and Assistance Service at (HICEAS)1-800-852-3388.

### **List of New Hampshire Medigap Carriers**

<b><u>Company</u></b>	<b><u>Phone</u></b>
AARP – United Health Care	1-800-523-5800
American Republic Ins. CO	1-800-473-9227
Bankers Life	1-800-621-3724
Bankers United Life Assurance	1-800-233-4624
Blue Cross/Anthem	1-800-225-2666
Central States	1-800-541-2363
Combined Insurance CO of America	1-800-544-5531
Mutual of Omaha	1-800-775-6000
Mutual Protectors Ins. CO	1-800-228-6080
Physicians Mutual	1-800-228-9100
State Farm Ins. CO	1-800-688-0895
United America	1-800-331-2512
USAA Life Ins. CO	1-800-531-8000